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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : D. Benjamin et al.

Serial No. : 10/037,519

Art Unit:

Filed : January 3, 2002

Examiner:

For : ALPHA SYNUCLEIN AGGREGATION ASSAYS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

May 14, 2002

(Date of Deposit)

Mary A. Appollina

(Name of applicant, assignee, or Registered Representative)

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May 14, 2002

(Date of Signature)

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Commissioner for Patents
Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Daniel Benjamin et al entitled ALPHA SYNUCLEIN AGGREGATION ASSAYS attorney Docket No.ORT-1550, to complete, pursuant to Rule 51, this application filed on January 3, 2002 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/ORT-1550/MAA in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/ORT-1550/MAA. This sheet is submitted in triplicate.

Respectfully submitted,

Mary A. Appollina
Reg. No. 34,087
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-3742

May 14, 2002

#3

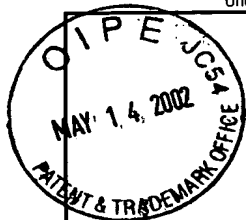
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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing ☐ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)
OR

Attorney Docket Number	ORT-1550
First Named Inventor	BENJAMIN ET AL.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ALPHA SYNNUCLEIN AGGREGATION ASSAYS
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/259,442	1/3/01	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

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☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City:

State:

ZIP

Country

Telephone:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) DANIEL

Family Name
or Surname BENJAMIN

Inventor's
Signature

Daniel Benjamin

Date

2-12-02

Residence: City BARNEGAT

State NJ

Country USA

Citizenship USA

Mailing Address 208 ELEVENTH STREET

City BARNEGAT

State NJ

ZIP 08005

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) SERGEY

Family Name
or Surname ILYIN

Inventor's
Signature

Date

Residence: City HATBORO

State PA

Country PA

Citizenship RUSSIA

Mailing Address 2529 HORSHAM ROAD, APT #J-22

City HATBORO

State PA

ZIP 19040

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) CARLOS R.

Family Name
or Surname PLATA-SALAMAN

Inventor's
Signature

Date

Residence: City AMBLER

State PA

Country USA

Citizenship USA

Mailing Address 1313 SQUIRE DRIVE

City AMBLER

State PA

ZIP 19002


Country USA

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<div>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR</div>	Attorney Docket Number	ORT-1550	
	First Named Inventor	BENJAMIN ET AL.	
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date		
	Group Art Unit		
Examiner Name			

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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(Title of the Invention)

the specification of which

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Application Serial No.	Filing Date	Status
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I hereby appoint:

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City:

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) DANIEL

Family Name
or Surname BENJAMIN

Inventor's
Signature

Date

Residence: City BARNEGAT

State NJ

Country USA

Citizenship USA

Mailing Address 208 ELEVENTH STREET

City BARNEGAT

State NJ

ZIP 08005

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) SERGEY

Family Name
or Surname ILYIN

Inventor's
Signature

Date

Residence: City HATBORO

State PA

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Citizenship RUSSIA

Mailing Address 2529 HORSHAM ROAD, APT #J-22

City HATBORO

State PA

ZIP 19040

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) CARLOS R.

Family Name
or Surname PLATA-SALAMAN

Inventor's
Signature

Date

Residence: City AMBLER

State PA

Country USA

Citizenship USA

Mailing Address 1313 SQUIRE DRIVE

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State PA

ZIP 19002

Country USA